Pro Se 14 (Rev. 12/16) Complaint for Violation of Civil Rights (Prisoner)

# UNITED STATES DISTRICT COURT

for the

Western District of Pennsylvania

Division

AGRON HASBAIRAMI

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

BLANKENSHIP

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)

Case No.

1:22-64-166

(to be filled in by the Clerk's Office)

CLERK, U.S. DISTRICT COURT FOR THE WESTERN DISTRICT OF PENNSYLVANIA

## COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Prisoner Complaint)

### NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should not contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include only: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

I.	The l	Parties to This Complaint				
	A.	The Plaintiff(s)				
		Provide the information below for e needed.	ach plaintiff named in the co	mplaint. Atṫacl	additional pages if	
,		Name	AGRON HASBA	IMARLA		
•		All other names by which				
•		you have been known:				
		ID Number	·		·	
		Current Institution	FCI Ray Brook			
		Address	FCI Ray Brook PO BOX 900	<del>.</del>		
		;	Ray Brook	NY	12977	
			City	State	Zip Code	
	В.	The Defendant(s)				
		individual, a government agency, ar listed below are identical to those co	or each defendant named in the complaint, whether the defendant, an organization, or a corporation. Make sure that the defendant contained in the above caption. For an individual defendant, income and check whether you are bringing this complaint against them i pacity, or both. Attach additional pages if needed.			

Defendant No. 1  Name  Job or Title (if known)  Shield Number  Employer	LT. BLANKENSHIP Lieutenant
Address	FCI Mckean PO BOX 5000
Address	Bradford PA 16701  City State Zip Code
Defendant No. 2  Name	Individual capacity X Official capacity
Job or Title <i>(if known)</i> Shield Number	<del></del>
Employer Address	
	City State Zip Code  Individual capacity Official capacity

Pro Se 1	4 (Rev. 12/1	6) Complaint for Violation of Civil Rights (Prison	er)		
		Defendant No. 3			
		Name .	÷		
		Job or Title (if known)	<del></del>		
		Shield Number	· · · · · · · · · · · · · · · · · · ·	<del></del>	
		Employer	<u> </u>	<del></del>	
		Address			
			City	State	Zip Code
	ı		Individual capacity	Official capacity	у
		Defendant No. 4		•	·
		Name			<del></del>
		Job or Title (if known)	<u> </u>	·	
		Shield Number		<u> </u>	
		Employer			
		Address			
		1			
			City	State	Zip Code
			Individual capacity	Official capacit	У
n.	Basis	for Jurisdiction			
	immu Feder	42 U.S.C. § 1983, you may sue state nities secured by the Constitution and al Bureau of Narcotics, 403 U.S. 388 tutional rights.	l [federal laws]." Under <i>Biv</i>	ens v. Six Unknown N	amed Agents of
	Α.	Are you bringing suit against (check	k all that apply):		
		X Federal officials (a Bivens cla	im)		
٠		State or local officials (a § 19	83 claim)		
	В.	Section 1983 allows claims alleging the Constitution and [federal laws] federal constitutional or statutory is	l." 42 U.S.C. § 1983. If you	i are suing under secti	on 1983, what
	C.	Plaintiffs suing under Bivens may are suing under Bivens, what consofficials?	only recover for the violation titutional right(s) do you cla	n of certain constitution im is/are being violate	onal rights. If you ed by federal

Religious	Freedom	Restoration	Act

D. Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under *Bivens*, explain how each defendant acted under color of federal law. Attach additional pages if needed.

### III. Prisoner Status

Indicate	whether you are a prisoner or other confined person as follows (check all that apply):		
	Pretrial detainee		
	Civilly committed detainee	•	
	Immigration detainee		
	Convicted and sentenced state prisoner		
$\boxtimes$	Convicted and sentenced federal prisoner,		,
	Other (explain)		

### IV. Statement of Claim

State as briefly as possible the facts of your case. Describe how each defendant was personally involved in the alleged wrongful action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

- A. If the events giving rise to your claim arose outside an institution, describe where and when they arose.
- B. If the events giving rise to your claim arose in an institution, describe where and when they arose.

See the attachment / FCI Mckean

### Pro Se 14 (Rev. 12/16) Complaint for Violation of Civil Rights (Prisoner)

What date and approximate time did the events giving rise to your claim(s) occur? C.

# March 30 - April 5, 2021

What are the facts underlying your claim(s)? (For example: What happened to you? Who did what? D. Was anyone else involved? Who else saw what happened?)

LT. Blankenship violated my religious rights to mean the punts above the ankles, violated BOP BOLICY 5360,09,CN-1 that allows me to wear the pants, violeted the chain of Command, even though Associate Worden and chaptain told how that I'm allowed to wear the pants

#### V. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

#### VI. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

1) Punitive damage of \$ 50,000 2) Exterminated from job because she is dangerous for security

of Facility by violating chain the the command, BOP Policy 3) repose from her position as LT.

4) if not, suspended and retrained and never be allowed

# VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

A.	Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?
	∑ Yes
	□ No
	If yes, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).
	FCI Mckean
В.	Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure?
	Yes
,	☐ No
	Do not know
C.	Does the grievance procedure at the jail, prison, or other correctional facility where your claim(s) arose cover some or all of your claims?
	X Yes
	□ No
	Do not know
	If yes, which claim(s)?

I, think it does since they responded the BP-229

D.	Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose
	concerning the facts relating to this complaint?

X Yes

 $\prod$  No

If no, did you file a grievance about the events described in this complaint at any other jail, prison, or other correctional facility?

Yes

 $\prod_{No}$ 

# E. If you did file a grievance:

1. Where did you file the grievance?

2. What did you claim in your grievance?

that she violated my rights BOP POLICY and chasnof conmand

3. What was the result, if any?

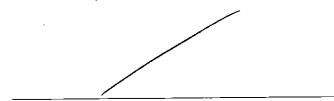
denied, the information protected by Privacy Act
5 USC & 552 a

4. What steps, if any, did you take to appeal that decision? Is the grievance process completed? If not, explain why not. (Describe all efforts to appeal to the highest level of the grievance process.)

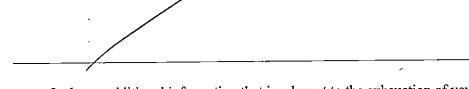
Yes I appealed it all the way, and I was denied

# . F. If you did not file a grievance:

1. If there are any reasons why you did not file a grievance, state them here:



2. If you did not file a grievance but you did inform officials of your claim, state who you informed, when and how, and their response, if any:



G. Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.

(Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies.)

### VIII. Previous Lawsuits

The "three strikes rule" bars a prisoner from bringing a civil action or an appeal in federal court without paying the filing fee if that prisoner has "on three or more prior occasions, while incarcerated or detained in any facility, brought an action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, malicious, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent danger of serious physical injury." 28 U.S.C. § 1915(g).

To the best of your knowledge, have you had a case dismissed based on this "three strikes rule"?

Ye:

If yes, state which court dismissed your case, when this occurred, and attach a copy of the order if possible.

	Pro Se 14 (Rev. 12	/16) Complaint fo	r Violation of Civi	l Rights (Prisoner)
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	**
LÅ	Yes
	No
If y	our answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is re than one lawsuit, describe the additional lawsuits on another page, using the same format.)
1.	Parties to the previous lawsuit
,	Plaintiff(s) HASBAJRAMI V
	Defendant(s) RICH GLOGAU
2.	Court (if federal court, name the district; if state court, name the county and State)  Western District of Pennsylvania
3.	Docket or index number  20-CV-84
4.	Name of Judge assigned to your case  Richard A. Lanzillo
-5.	Approximate date of filing lawsuit  3-30-2020
6.	Is the case still pending?
	∑ Yes .
	□ No
	If no, give the approximate date of disposition.
7.	What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)
	<ol> <li>mor</li> <li>2.</li> <li>3.</li> <li>6.</li> </ol>

Pro S	e 14 (Rev. 1	2/16) Complaint for Violation of Civil Rights (Prisoner)
		Yes Yes
		☐ No
	D.	If your answer to C is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.)
		1. Parties to the previous lawsuit
	~	Plaintiff(s) Agron Hasbajrami v  Defendant(s) Thomas Hill
		Defendant(s)
		2. Court (if federal court, name the district; if state court, name the county and State)
		Western District of PA
		3. Docket or index number
		20-CV - 220
		•
		4. Name of Judge assigned to your case
		Richard A. Lanzillo
		5. Approximate date of filing lawsuit
		October 2020
		6. Is the case still pending?
		Yes
		∑ No
		<b>*</b>
		If no, give the approximate date of disposition Feb. 2021
		7. What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)
		Case Dismissed

# IX. Certification and Closing

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

### A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

	Date of signing:	5-23-22		
	Signature of Plaintiff Printed Name of Plaintiff Prison Identification # Prison Address	Alund Agron Hasbajram #65794-053 PCI Ray Brook Ray Brook		0× 900 12971 Zip Code
В.	For Attorneys			
	Date of signing:	·		
	Signature of Attorney Printed Name of Attorney			
	Bar Number			
	Name of Law Firm			
•	Address			
	•	City	State	Zip Code
1	Telephone Number			
	E-mail Address	<u> </u>		